

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

EASTERN DISTRICT OF NEW YORK

Case number (if known)

Chapter

11☐ Check if this an amended filing

## Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Showfields Inc.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 82-2983969

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

c/o Showfields NY 2 LLC  
187 Kent Avenue, 1st Field  
Brooklyn, NY 11249

Number, Street, City, State &amp; ZIP Code

187 Kent Avenue, 1st Field  
Brooklyn, NY 11249

P.O. Box, Number, Street, City, State &amp; ZIP Code

Kings

County

**Location of principal assets, if different from principal place of business**

Number, Street, City, State &amp; ZIP Code

5. Debtor's website (URL) \_\_\_\_\_

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))☐ Partnership (excluding LLP)☐ Other. Specify: \_\_\_\_\_

Debtor **Showfields Inc.**  
Name

Case number (if known)

**7. Describe debtor's business**

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.4552**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

Check one:

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. Check **all** that apply:

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☒ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

Debtor **Showfields Inc.** Case number (if known) \_\_\_\_\_  
Name

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? ☐ No ☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	<b>Showfields NY2 LLC</b>	Relationship	<b>affiliate anticipated filing</b>
District	<b>Eastern District of New York</b>	When	<b>10/13/23</b>
		Case number, if known	

11. Why is the case filed in this district? *Check all that apply:*
- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention? ☒ No ☐ Yes.
- Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention? (Check all that apply.)**
- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
 What is the hazard? \_\_\_\_\_
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other \_\_\_\_\_
- Where is the property?** \_\_\_\_\_  
 Number, Street, City, State & ZIP Code
- Is the property insured?**
- ☐ No
- ☐ Yes. Insurance agency \_\_\_\_\_  
 Contact name \_\_\_\_\_  
 Phone \_\_\_\_\_

### Statistical and administrative information

13. Debtor's estimation of available funds. *Check one:*
- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- |                                           |                                        |                                            |
|-------------------------------------------|----------------------------------------|--------------------------------------------|
| <input type="checkbox"/> 1-49             | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000   | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199          | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999          |                                        |                                            |

15. Estimated Assets
- |                                                           |                                                        |                                                          |
|-----------------------------------------------------------|--------------------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> \$0 - \$50,000                   | <input type="checkbox"/> \$1,000,001 - \$10 million    | <input type="checkbox"/> \$500,000,001 - \$1 billion     |
| <input type="checkbox"/> \$50,001 - \$100,000             | <input type="checkbox"/> \$10,000,001 - \$50 million   | <input type="checkbox"/> \$1,000,000,001 - \$10 billion  |
| <input checked="" type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million  | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million          | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion          |

Debtor

**Showfields Inc.**

Name

Case number (if known)

**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☒ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Showfields Inc.** Case number (if known) \_\_\_\_\_  
 Name

**Request for Relief, Declaration, and Signatures**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **October 6, 2023**  
 MM / DD / YYYY

**X /s/ Tal Zvi Nathanel**  
 Signature of authorized representative of debtor  
 Title **CEO**

**Tal Zvi Nathanel**  
 Printed name

**18. Signature of attorney**

**X /s/ Rachel S. Blumenfeld**  
 Signature of attorney for debtor

Date **October 6, 2023**  
 MM / DD / YYYY

**Rachel S. Blumenfeld**  
 Printed name

**Law Office of Rachel S. Blumenfeld PLLC**  
 Firm name

**26 Court Street  
 Suite 2220  
 Brooklyn, NY 11242**

Number, Street, City, State & ZIP Code

Contact phone **718-858-9600**

Email address **rachel@blumenfeldbankruptcy.com**

**1458 NY**

Bar number and State

**Fill in this information to identify the case:**Debtor name Showfields Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 6, 2023**X /s/ Tal Zvi Nathanel**

Signature of individual signing on behalf of debtor

**Tal Zvi Nathanel**

Printed name

**CEO**

Position or relationship to debtor

**Fill in this information to identify the case:**Debtor name **Showfields Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NEW YORK**

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders****12/15**

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
American Express 200 Vesey Street New York, NY 10285		credit card				\$25,462.00
Amir Zwickel 349 Metropolitan Avenue Apt. 6A Brooklyn, NY 11211		unreimbursed expenses				\$17,000.00
BDG-CPAs 76 N. Walnut Street Ridgewood, NJ 07450		CPA's - critical vendors				\$12,000.00
BeezB Ltd. Kefar Sava 4465101 Israel		social media / professional services / critical vendor				\$12,750.00
Broad Prince Realty Corp. 580 Broadway, Suite 307 New York, NY 10012		landlord - premises were vacated. landlord has \$10,000 security deposit.	Subject to Setoff			\$57,414.80
Gong.io Inc. 265 Cambridge Ave. Suite 60717 Palo Alto, CA 94306		software company for sales team	Contingent Unliquidated Disputed			\$26,000.00
Hanna Mitchell 325 F St E Salt Lake City, UT 84103-3057		wages				\$10,000.00
Jacqueline McNamara 741 6th Street Apt. 102 Miami Beach, FL 33139		wages				\$10,000.00

Debtor **Showfields Inc.**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Johanna Yannello 200 W 70th St. Apt 7K New York, NY 10023-4327		wages				\$9,575.75
Martina Asgari-Majd 60 S 8th St. Apt 535 Brooklyn, NY 11249-6154		wages				\$10,000.00
McDermott Will & Emery P.O. Box 6043 Chicago, IL 60680		attorneys / professional services				\$60,474.00
Mesh Credit Card 225 West 35th Street New York, NY 10001		credit card				\$69,546.00
Ori Cohen Amos Oz 11 Herzliya, Israel		1099 - critical vendor				\$10,000.00
Pipe Technologies Inc. 360 NW 27th Street Miami, FL 33127		revenue based financing	Contingent Unliquidated Disputed			\$1,400,000.00
RTR Bag & Co. 400 East 54th, Suite #10E New York, NY 10022		shopping bags				\$39,381.00
Saul Ewing Arnstein & Lehr LLP 1500 Market Street, 38th Fl. Philadelphia, PA 19102-2186		HR attorneys / critical vendors				\$69,889.25
Silicon Valley Bank c/o First Citizens Bank 239 Fayetteville Street Raleigh, NC 27601		credit cards				\$103,088.00
Small Business Administration 409 3rd St, SW Washington, DC 20416				\$515,823.24	\$0.00	\$515,823.24
SoftwareHut LLC 40 Exchange Place, Suite 1602 New York, NY 10005		software developer / critical vendor				\$51,742.00



Debtor **Showfields Inc.**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Tal Zvi Nathanel 250 West 85th St Apt. 3B New York, NY 10024		unreimbursed company expenses				\$57,945.00

**Fill in this information to identify the case:**Debtor name **Showfields Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NEW YORK**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

<b>1a. Real property:</b>	
Copy line 88 from <i>Schedule A/B</i> .....	\$ <b>0.00</b>
<b>1b. Total personal property:</b>	
Copy line 91A from <i>Schedule A/B</i> .....	\$ <b>8,117.58</b>
<b>1c. Total of all property:</b>	
Copy line 92 from <i>Schedule A/B</i> .....	\$ <b>8,117.58</b>

**Part 2: Summary of Liabilities**

<b>2. Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D)	
Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <b>515,823.24</b>
<b>3. Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
<b>3a. Total claim amounts of priority unsecured claims:</b>	
Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <b>106,723.15</b>
<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b>	
Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <b>2,103,264.15</b>
<b>4. Total liabilities</b> .....	
Lines 2 + 3a + 3b	\$ <b>2,725,810.54</b>

**Fill in this information to identify the case:**Debtor name **Showfields Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NEW YORK**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206A/B  
Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **Silicon Valley Bank. Account has a current negative balance of \$2,082.01.****Business Checking****4663****\$0.00**3.2. **Valley Bank****Business Checking****7800****\$3,117.58****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$3,117.58****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.  
☐ Yes Fill in the information below.

**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.  
☐ Yes Fill in the information below.

Debtor **Showfields Inc.**  
Name

Case number (If known)

**Part 4: Investments**

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
- ☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
- ☐ Yes Fill in the information below.

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☒ No. Go to Part 8.
- ☐ Yes Fill in the information below.

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
- ☐ Yes Fill in the information below.

**Part 9: Real property**

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
- ☐ Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
- ☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets IP Trademark on "Showfields"; "The Most Interesting Store in the World"; "The Most Interesting In The World"; and "The Most Interesting Store in the World".	\$0.00		Unknown

61. Internet domain names and websites

62. Licenses, franchises, and royalties

Debtor **Showfields Inc.**  
Name

Case number (If known) \_\_\_\_\_

63. **Customer lists, mailing lists, or other compilations**64. **Other intangibles, or intellectual property**65. **Goodwill**66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

**\$0.00**67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)☒ No☐ Yes68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes**Part 11: All other assets**70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.☒ Yes Fill in the information below.**Current value of  
debtor's interest**71. **Notes receivable**

Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**74. **Causes of action against third parties (whether or not a lawsuit has been filed)**75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**76. **Trusts, equitable or future interests in property**77. **Other property of any kind not already listed** *Examples:* Season tickets, country club membership**United States Trademark for "THE MOST INTERESTING STORE IN THE WORLD".****Unknown**

Debtor **Showfields Inc.**  
Name

Case number (If known) \_\_\_\_\_

Parent company of the following companies: (1) Showfields NY1 LLC (this company is expected to dissolve shortly); (2) FL1 LLC (this company is expected to dissolve shortly); (3) DC1 LLC - active, not expected to file for bankruptcy (owns 99% /investor owns 1%); (4) NY2 LLC (Brooklyn, entity will be filing bankruptcy); (5) Showfields Magic Box LLC (this company - a pop up - is expected to dissolve in approx 4 to 6 months when the short term lease in LA is completed).

Unknown

leasehold improvements; intangible assets; computers;

Unknown

15 pedestals of different heights; 2 arched showcases; 2 teared showcases; pastrty vitrine; room and board shelf; room and board table; tv frame; shelf structure cabinet health; simris light fixture; 6 misc chairs; commercial fridge; 2 armchairs; yogibo poufs; 3 moon lamps; metal structure; misc greenery; 2 leather chairs from the loft; misc props. location: Manhattan Mini Storage unit

\$5,000.00

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

**\$5,000.00**

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor **Showfields Inc.**  
Name

Case number (If known)

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<b>\$3,117.58</b>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<b>\$0.00</b>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<b>\$0.00</b>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<b>\$0.00</b>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<b>\$0.00</b>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<b>\$0.00</b>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<b>\$0.00</b>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<b>\$0.00</b>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<b>\$0.00</b>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<b>\$0.00</b>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<b>+</b> <b>\$5,000.00</b>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<b>\$8,117.58</b>	<b>+ 91b. \$0.00</b>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<b>\$8,117.58</b>

**Fill in this information to identify the case:**Debtor name **Showfields Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NEW YORK**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15****Be as complete and accurate as possible.****1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
<b>2.1</b>	<b>AJ Equity Group LLC</b> <small>Creditor's Name</small>  <b>1648 61st Street</b> <b>Brooklyn, NY 11204</b> <small>Creditor's mailing address</small>   <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b>  <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>FOR NOTICE PURPOSES - MCA</b>  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>Unknown</b>	<b>\$0.00</b>

<b>2.2</b>	<b>CFG Merchant Solutions, LLC</b> <small>Creditor's Name</small> <b>180 Maiden Lane, 15th Floor</b> <b>New York, NY 10038</b> <small>Creditor's mailing address</small>   <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b>  <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b>	Describe debtor's property that is subject to a lien <b>MCA</b>  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply	<b>Unknown</b>	<b>\$0.00</b>
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Debtor **Showfields Inc.** Case number (if known)

Name

☐ No☐ Yes. Specify each creditor, including this creditor and its relative priority.☐ Contingent☐ Unliquidated☐ Disputed**2.3 Dynasty Capital 26, LLC**

Creditor's Name

**700 Canal St. 1st Floor  
Stamford, CT 06902**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☐ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**MCA****Unknown****\$0.00**

Describe the lien

Is the creditor an insider or related party?

☐ No☐ Yes

Is anyone else liable on this claim?

☐ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.4 Kalamata Capital Group, LLC**

Creditor's Name

**80 State Street  
Albany, NY 12207**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☐ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**MCA****Unknown****\$0.00**

Describe the lien

Is the creditor an insider or related party?

☐ No☐ Yes

Is anyone else liable on this claim?

☐ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.5 OnDeck**

Creditor's Name

**4700 W. Daybreak Pkwy  
Suite 200  
South Jordan, UT 84009**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**MCA****\$0.00****\$0.00**

Describe the lien

Is the creditor an insider or related party?

☐ No

Debtor <b>Showfields Inc.</b> <hr/> Name <hr/> Creditor's email address, if known <hr/> <b>Date debt was incurred</b> <hr/> <b>Last 4 digits of account number</b> <hr/> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. <hr/>	Case number (if known) _____  <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
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2.6	<b>Rocket Capital NY LLC</b> <hr/> Creditor's Name <b>1250 E. Hallandale Beach Blvd.</b> <b>Suite 505</b> <b>Hallandale, FL 33009</b> <hr/> Creditor's mailing address <hr/> <hr/> Creditor's email address, if known <hr/> <b>Date debt was incurred</b> <hr/> <b>Last 4 digits of account number</b> <hr/> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. <hr/>	<b>Describe debtor's property that is subject to a lien</b> <b>MCA</b> <hr/> <b>Describe the lien</b> <hr/> <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>Unknown</b> <hr/>	<b>\$0.00</b> <hr/>
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2.7	<b>Small Business Administration</b> <hr/> Creditor's Name <b>409 3rd St, SW</b> <b>Washington, DC 20416</b> <hr/> Creditor's mailing address <hr/> <hr/> Creditor's email address, if known <hr/> <b>Date debt was incurred</b> <b>3/22/22</b> <b>Last 4 digits of account number</b> <b>7403</b> <hr/> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. <hr/>	<b>Describe debtor's property that is subject to a lien</b>  <hr/> <b>Describe the lien</b> <hr/> <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$515,823.24</b> <hr/>	<b>\$0.00</b> <hr/>
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Debtor **Showfields Inc.** Case number (if known) \_\_\_\_\_  
Name

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$515,823.24**

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did  
you enter the related creditor?

Last 4 digits of  
account number for  
this entity

**Fill in this information to identify the case:**Debtor name **Showfields Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NEW YORK**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>Agnia Ivanov</b> <b>1 Valley View Ct</b> <b>Huntington, NY 11743-5020</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,249.46</b>	<b>\$1,249.46</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address <b>Christine Bullock</b> <b>28 Burlington Path Rd</b> <b>Cream Ridge, NJ 08514-2003</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,228.39</b>	<b>\$1,228.39</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor <b>Showfields Inc.</b>		Case number (if known)	
Name			
2.3	Priority creditor's name and mailing address <b>Constance Blatt</b> <b>10 Downing St</b> <b>Apt. 5G</b> <b>New York, NY 10014-4792</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,377.00</b> <b>\$1,377.00</b>
Date or dates debt was incurred		Basis for the claim: <b>wages</b>	
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.4	Priority creditor's name and mailing address <b>Emily Goldberg</b> <b>1348 Beech Street</b> <b>Atlantic Beach, NY 11509</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,443.75</b> <b>\$2,443.75</b>
Date or dates debt was incurred		Basis for the claim: <b>wages</b>	
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.5	Priority creditor's name and mailing address <b>Frances Shellman</b> <b>137 W 82nd St, Apt. 1A</b> <b>New York, NY 10024-5545</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,013.28</b> <b>\$3,013.28</b>
Date or dates debt was incurred		Basis for the claim: <b>wages</b>	
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.6	Priority creditor's name and mailing address <b>Gabrielle Gangi</b> <b>23 Egret Way</b> <b>Center Moriches, NY 11934-3028</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$6,680.88</b> <b>\$6,680.88</b>
Date or dates debt was incurred		Basis for the claim: <b>wages</b>	
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)		
2.7	<b>Priority creditor's name and mailing address</b> <b>Hanna Mitchell</b> <b>325 F St E</b> <b>Salt Lake City, UT 84103-3057</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$10,000.00</b>	<b>\$10,000.00</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.8	<b>Priority creditor's name and mailing address</b> <b>Internal Revenue Service</b> <b>US Dept of Treasury</b> <b>Philadelphia, PA 19255-1498</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: <b>FOR NOTICE PURPOSES ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.9	<b>Priority creditor's name and mailing address</b> <b>Jacqueline McNamara</b> <b>741 6th Street</b> <b>Apt. 102</b> <b>Miami Beach, FL 33139</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$10,000.00</b>	<b>\$10,000.00</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.10	<b>Priority creditor's name and mailing address</b> <b>Jenna Lichtman</b> <b>210 East 85th Street</b> <b>New York, NY 10028</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$6,407.33</b>	<b>\$6,407.33</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)		
2.11	Priority creditor's name and mailing address <b>Johanna Yannello</b> <b>200 W 70th St.</b> <b>Apt 7K</b> <b>New York, NY 10023-4327</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$9,575.75</b>	<b>\$9,575.75</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.12	Priority creditor's name and mailing address <b>Jonathan Schenirer - Dir PM</b> <b>167 Madison Avenue</b> <b>Ste 205 #107</b> <b>New York, NY 10016</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$9,104.93</b>	<b>\$9,104.93</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.13	Priority creditor's name and mailing address <b>Kara Walsh</b> <b>310 1st Ave, Apt. 1E</b> <b>New York, NY 10009-1703</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$4,862.07</b>	<b>\$4,862.07</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.14	Priority creditor's name and mailing address <b>Martina Asgari-Majd</b> <b>60 S 8th St.</b> <b>Apt 535</b> <b>Brooklyn, NY 11249-6154</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$10,000.00</b>	<b>\$10,000.00</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)		
2.15	Priority creditor's name and mailing address <b>New York State Queens Borough Hall 120-55 Queens Boulevard Jamaica, NY 11424</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>\$0.00</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: <b>FOR NOTICE PURPOSES ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.16	Priority creditor's name and mailing address <b>NYC Dept. of Finance 66 John Street, Room 104 New York, NY 10038</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>\$0.00</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: <b>FOR NOTICE PURPOSES ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.17	Priority creditor's name and mailing address <b>NYC Dept. of Finance 59 Maiden Lane New York, NY 10038</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>\$0.00</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: <b>FOR NOTICE PURPOSES ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.18	Priority creditor's name and mailing address <b>Riley Roche 500 Brickell Ave Apt 2008 Miami, FL 33131</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,921.88</b>	<b>\$2,921.88</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		



Debtor	<b>Showfields Inc.</b> Name	Case number (if known)	
2.19	Priority creditor's name and mailing address <b>Romi Bachar</b> <b>301 E 79th St Apt 18C</b> <b>New York, NY 10075-0940</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<div style="border-top: 1px solid black; border-bottom: 1px solid black; display: inline-block; width: 100px;">\$1,300.50</div> <div style="border-top: 1px solid black; border-bottom: 1px solid black; display: inline-block; width: 100px;">\$1,300.50</div>
	Date or dates debt was incurred  <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.20	Priority creditor's name and mailing address <b>Samantha Benvegna</b> <b>401 2nd Ave, Apt 9C</b> <b>New York, NY 10010-3912</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<div style="border-top: 1px solid black; border-bottom: 1px solid black; display: inline-block; width: 100px;">\$7,756.25</div> <div style="border-top: 1px solid black; border-bottom: 1px solid black; display: inline-block; width: 100px;">\$7,756.25</div>
	Date or dates debt was incurred  <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.21	Priority creditor's name and mailing address <b>Sharit Kassab</b> <b>9801 Collins Ave</b> <b>Miami Beach, FL 33154</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<div style="border-top: 1px solid black; border-bottom: 1px solid black; display: inline-block; width: 100px;">\$2,473.78</div> <div style="border-top: 1px solid black; border-bottom: 1px solid black; display: inline-block; width: 100px;">\$2,473.78</div>
	Date or dates debt was incurred  <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.22	Priority creditor's name and mailing address <b>Sophy Bohbot</b> <b>1621 S Treasure Dr</b> <b>North Bay Village, FL 33141-4128</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<div style="border-top: 1px solid black; border-bottom: 1px solid black; display: inline-block; width: 100px;">\$8,861.56</div> <div style="border-top: 1px solid black; border-bottom: 1px solid black; display: inline-block; width: 100px;">\$8,861.56</div>
	Date or dates debt was incurred  <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: <b>wages</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Case number (if known)
<b>Showfields Inc.</b> Name	
2.23 Priority creditor's name and mailing address <b>Ty'Arrah Walker</b> <b>770 Maine Ave SW</b> <b>Apt. 305</b> <b>Washington, DC 20024-2589</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date or dates debt was incurred	Basis for the claim: <b>wages</b>
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.24 Priority creditor's name and mailing address <b>Valentina Diaz</b> <b>1865 Brickell Ave</b> <b>Apt 1608</b> <b>Miami, FL 33129-1621</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date or dates debt was incurred	Basis for the claim: <b>wages</b>
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.25 Priority creditor's name and mailing address <b>Vane Libos</b> <b>2200 Sole Mia Square Ln</b> <b>Apt 615</b> <b>North Miami, FL 33181-1261</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date or dates debt was incurred	Basis for the claim: <b>wages</b>
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim
3.1 Nonpriority creditor's name and mailing address <b>24 Seven LLC</b> <b>105 Maxess Road, Suite N201</b> <b>Melville, NY 11747</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>goods &amp; services</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2 Nonpriority creditor's name and mailing address <b>Amazon Web Services Inc.</b> <b>2121 7th Avenue</b> <b>Seattle, WA 98121</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>goods &amp; services</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Showfields Inc.</b> Name _____	Case number (if known) _____
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3.3	<b>Nonpriority creditor's name and mailing address</b> <b>American Express</b> <b>200 Vesey Street</b> <b>New York, NY 10285</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$25,462.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.4	<b>Nonpriority creditor's name and mailing address</b> <b>Aminov Eshel and Partners LLP</b> <b>350 Motor Parkway</b> <b>Hauppauge, NY 11788</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$5,955.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>accounting firm / critical vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.5	<b>Nonpriority creditor's name and mailing address</b> <b>Amir Zwickel</b> <b>349 Metropolitan Avenue</b> <b>Apt. 6A</b> <b>Brooklyn, NY 11211</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$17,000.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>unreimbursed expenses</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Avidxchange, Inc.</b> <b>P.O. Box 715376</b> <b>Cincinnati, OH 45271-5376</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$3,750.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>accounting software/professional services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.7	<b>Nonpriority creditor's name and mailing address</b> <b>Avidxchnage</b> <b>PO Box 715376</b> <b>Cincinnati, OH 45271-5376</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$3,947.91</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>software</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.8	<b>Nonpriority creditor's name and mailing address</b> <b>BDG-CPAs</b> <b>76 N. Walnut Street</b> <b>Ridgewood, NJ 07450</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$12,000.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>CPA's - critical vendors</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.9	<b>Nonpriority creditor's name and mailing address</b> <b>BeezB Ltd.</b> <b>Kefar Sava</b> <b>4465101 Israel</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$12,750.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>social media / professional services / critical vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Showfields Inc.</b> Name _____	Case number (if known) _____
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3.10	<b>Nonpriority creditor's name and mailing address</b> <b>BFA NYC LLC</b> <b>20 W. 20th Street Suite 700</b> <b>New York, NY 10011</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$4,000.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>marketing company</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Broad Prince Realty Corp.</b> <b>580 Broadway, Suite 307</b> <b>New York, NY 10012</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$57,414.80</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>landlord - premises were vacated. landlord has \$10,000 security deposit.</u>  Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
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3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Calvin Jazz Walker</b> <b>4439 Crested Butte Ct.</b> <b>Jacksonville, FL 32210</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$200.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>marketing vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Cision US Inc</b> <b>300 S Riverside Plz</b> <b>Chicago, IL 60606</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$560.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>professional services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Dan Klores Communication LLC</b> <b>261 Fifth Ave., 3rd Floor</b> <b>New York, NY 10016</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$7,500.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>PR agency</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.15	<b>Nonpriority creditor's name and mailing address</b> <b>DocuSign</b> <b>221 Main Street, Suite 1000</b> <b>San Francisco, CA 94105</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$4,994.64</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>goods &amp; services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.16	<b>Nonpriority creditor's name and mailing address</b> <b>Doreen Edri</b> <b>20355 NE 34 Ct.</b> <b>Aventura, FL 33180</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$3,000.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>1099 vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Name	Case number (if known)
<b>Showfields Inc.</b> Name 3.17 Nonpriority creditor's name and mailing address <b>Gong.io Inc.</b> <b>265 Cambridge Ave. Suite 60717</b> <b>Palo Alto, CA 94306</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$26,000.00</b> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>software company for sales team</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18 Nonpriority creditor's name and mailing address <b>HubSpot Inc</b> <b>2 Canal Park</b> <b>Cambridge, MA 02141</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$6,617.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>software marketing</b></u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.19 Nonpriority creditor's name and mailing address <b>Intercom.io</b> <b>55 2nd Street, 4th Floor</b> <b>San Francisco, CA 94105</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$356.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>software</b></u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.20 Nonpriority creditor's name and mailing address <b>Jefferson G. Wenzel</b> <b>19 Dutch Street</b> <b>New York, NY 10038</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$1,500.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>software / IT</b></u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.21 Nonpriority creditor's name and mailing address <b>Laura Kluthe Executive Search</b> <b>20 Esmond Place</b> <b>Tenafly, NJ 07670</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$2,500.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>recruiting company</b></u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.22 Nonpriority creditor's name and mailing address <b>Manhattan Mini Storage</b> <b>220 South Street</b> <b>New York, NY 10002</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$5,439.99</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>storage facility</b></u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.23 Nonpriority creditor's name and mailing address <b>McDermott Will &amp; Emery</b> <b>P.O. Box 6043</b> <b>Chicago, IL 60680</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$60,474.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>attorneys / professional services</b></u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
3.24	<b>Showfields Inc.</b> <b>Mesh Credit Card</b> <b>225 West 35th Street</b> <b>New York, NY 10001</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$69,546.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.25	<b>Nonpriority creditor's name and mailing address</b> <b>Mor Edri</b> <b>32 Rutgers St.</b> <b>Closter, NJ 07624</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$2,500.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>former employee</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.26	<b>Nonpriority creditor's name and mailing address</b> <b>Noho Bid</b> <b>636 Broadway, Suite 1208</b> <b>New York, NY 10012</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$4,420.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27	<b>Nonpriority creditor's name and mailing address</b> <b>Noho Bid</b> <b>636 Broadway Ste 1208</b> <b>New York, NY 10012</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$0.00</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28	<b>Nonpriority creditor's name and mailing address</b> <b>Ori Cohen</b> <b>Amos Oz 11</b> <b>Herzliya, Israel</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$10,000.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>1099 - critical vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29	<b>Nonpriority creditor's name and mailing address</b> <b>Pipe Technologies Inc.</b> <b>360 NW 27th Street</b> <b>Miami, FL 33127</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$1,400,000.00</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>revenue based financing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30	<b>Nonpriority creditor's name and mailing address</b> <b>Profitian Finance NZ Ltd.</b> <b>3 Hamatechet</b> <b>Kadima Tzoran</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$648.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>finance company /professional services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Showfields Inc.</b> Name _____	Case number (if known) _____
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3.31	<b>Nonpriority creditor's name and mailing address</b> <b>Read Fresh by Nestle</b> <b>PO Box 856680</b> <b>Louisville, KY 40285</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$79.56</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>food services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.32	<b>Nonpriority creditor's name and mailing address</b> <b>RTR Bag &amp; Co.</b> <b>400 East 54th, Suite #10E</b> <b>New York, NY 10022</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$39,381.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>shopping bags</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.33	<b>Nonpriority creditor's name and mailing address</b> <b>Saul Ewing Arnstein &amp; Lehr LLP</b> <b>1500 Market Street, 38th Fl.</b> <b>Philadelphia, PA 19102-2186</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$69,889.25</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>HR attorneys / critical vendors</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.34	<b>Nonpriority creditor's name and mailing address</b> <b>Sendtown LLC</b> <b>9639 Savona Winds Drive</b> <b>Delray Beach, FL 33446</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$6,982.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>critical vendor / professional services for sales team</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.35	<b>Nonpriority creditor's name and mailing address</b> <b>Silicon Valley Bank</b> <b>c/o First Citizens Bank</b> <b>239 Fayetteville Street</b> <b>Raleigh, NC 27601</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$103,088.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>credit cards</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.36	<b>Nonpriority creditor's name and mailing address</b> <b>SoftwareHut LLC</b> <b>40 Exchange Place, Suite 1602</b> <b>New York, NY 10005</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$51,742.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>software developer / critical vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.37	<b>Nonpriority creditor's name and mailing address</b> <b>Spacio Terreno Inc.</b> <b>146 Pelton Avenue</b> <b>Staten Island, NY 10310</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$4,062.50</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>critical vendor - professional services - build out/ fabrication / vinyls / contractors</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Showfields Inc.</b> <small>Name</small>	Case number (if known) _____
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3.38	<b>Nonpriority creditor's name and mailing address</b> <b>St. Moritz Security Services</b> <b>4600 Clairton Blvd.</b> <b>Pittsburgh, PA 15236</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.39	<b>Nonpriority creditor's name and mailing address</b> <b>Studio 96 NYC Incorporated</b> <b>32 W. 39th Street, Fl. 4</b> <b>New York, NY 10018</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>advertising</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,000.00</b>
3.40	<b>Nonpriority creditor's name and mailing address</b> <b>Tal Zvi Nathanel</b> <b>250 West 85th St</b> <b>Apt. 3B</b> <b>New York, NY 10024</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>unreimbursed company expenses</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$57,945.00</b>
3.41	<b>Nonpriority creditor's name and mailing address</b> <b>Talentpop</b> <b>1954 Placentia Ave</b> <b>Costa Mesa, CA 92627</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>software IT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,963.00</b>
3.42	<b>Nonpriority creditor's name and mailing address</b> <b>The Law Offices of Steven</b> <b>Zakharyayev, LLC</b> <b>10 W 37th St., 6th Floor</b> <b>New York, NY 10018</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>FOR NOTICE PURPOSES RE AJ EQUITY GROUP LLC</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.43	<b>Nonpriority creditor's name and mailing address</b> <b>Warren Kalyan &amp; Mattocks</b> <b>506 W 14th St A</b> <b>Austin, TX 78701</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>liquor license attorneys /professional services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,777.50</b>

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**



Debtor **Showfields Inc.**  
Name

Case number (if known)

**5. Add the amounts of priority and nonpriority unsecured claims.**

**5a. Total claims from Part 1**

**5b. Total claims from Part 2**

**5c. Total of Parts 1 and 2**

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <b>106,723.15</b>
5b. +	\$ <b>2,103,264.15</b>
5c.	\$ <b>2,209,987.30</b>

**Fill in this information to identify the case:**Debtor name Showfields Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

**Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Fill in this information to identify the case:**Debtor name **Showfields Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NEW YORK**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G.** Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*2.1 **Tal Zvi Nathanel****250 West 85th St  
Apt. 3B  
New York, NY 10024  
personal guarantee for: American  
Express; SBA loan; MCAs - company  
signed an indemnificaiton on each debt.**☐ D \_\_\_\_\_  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

**Fill in this information to identify the case:**Debtor name Showfields Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From 1/01/2023 to **Filing Date****Sources of revenue**

Check all that apply

☒ Operating a business☐ Other \_\_\_\_\_**Gross revenue**

(before deductions and exclusions)

\$2,707.00**For prior year:**From 1/01/2022 to 12/31/2022☒ Operating a business☐ Other \_\_\_\_\_\$2,028,210.00**For year before that:**From 1/01/2021 to 12/31/2021☒ Operating a business☐ Other \_\_\_\_\_\$641,643.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from****each source**  
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer***Check all that apply*

Debtor **Showfields Inc.**

Case number (if known) \_\_\_\_\_

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <b>EXHIBITS TO BE SUBMITTED</b>		<b>\$0.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b>payroll; critical vendors and other goods &amp; services</b>

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. <b>EXHIBITS TO BE SUBMITTED</b>		<b>\$0.00</b>	

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	-----------------------------------------	-----------------------	--------

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. <b>Kalamata Capital Group, LLC v. Showfields NY 1 LLC dba Showfields; Showfields Inc; Showfields, Inc., et al 155729/2023</b>	<b>breach of contract</b>	<b>Supreme Court of the State of New York County of New York</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. <b>AJ Equity Group LLC v. Showfields NY 1 LLC; et al</b>	<b>convension of judgment</b>	<b>Supreme Court of the State of New York County of New York</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Showfields Inc.**

Case number (if known)

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.3.	<b>Thomas Olsen v. Showfields Inc.</b>	<b>non accessibility per WCAG 2.0 accessibility standards</b>	<b>Eastern District of New York District Court</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None
**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**
☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (<i>Schedule A/B: Assets – Real and Personal Property</i>).</p>		

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<b>Law Office of Rachel S. Blumenfeld PLLC</b> 26 Court Street Suite 2220 Brooklyn, NY 11242	<b>\$20,000 (plus \$1,738.00 filing fee). Total \$21,738.00</b>	<b>10/3/2023</b>	<b>\$21,738.00</b>
	Email or website address <u>rachel@blumenfeldbankruptcy.com</u>			
	Who made the payment, if not debtor?			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case

Debtor **Showfields Inc.**

Case number (if known) \_\_\_\_\_

to a self-settled trust or similar device.  
Do not include transfers already listed on this statement.

☐ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
-----------------------------------	---------------------------------------------------------------------------------------	---------------------------	--------------------------

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
14.1. 636 Broadway Room 520 New York, NY 10012	2019 through 2021
14.2. 580 Broadway Suite 906 New York, NY 10012	Feb 2022 through August 2023

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:  
- diagnosing or treating injury, deformity, or disease, or  
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☐ No. Go to Part 9.  
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	-------------------------------------------------------------------------------------	---------------------------------------------------------------------------------

**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

☐ No.  
☐ Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

☐ No. Go to Part 10.  
☐ Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

Debtor **Showfields Inc.**

Case number (if known) \_\_\_\_\_

**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
----------------------------------------	---------------------------------	-------------------------------	------------------------------------------------------	-----------------------------------------

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
-----------------------------------------	-------------------------------------------	-----------------------------	----------------------------

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
<b>Manhattan Minim Storage</b> <b>220 South Street</b> <b>New York, NY 10002</b>	<b>not applicable</b>	<b>inventory; office supplies &amp; equipment: 15 pedestals of different heights; 2 arched showcases; 2 teared showcases; pastrty vitrine; room and board shelf; room and board table; tv frame; shelf structure cabinet health; simris light fixture; 6 misc chairs; commercial fridge; 2 armchairs; yogibo poufs; 3 moon lamps; metal structure; misc greenery; 2 leather chairs from the loft; misc props. Approx value \$5,000 to \$7,000.</b>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None
**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).



Debtor **Showfields Inc.**

Case number (if known)

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.  
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**Part 13: Details About the Debtor's Business or Connections to Any Business**

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed
25.1. Showfields FL 1 LLC 530 Lincoln Rd Miami Beach, FL 33139	same nature of business as other entities	EIN: 84-4280949	From-To 1/14/2020. Business expected to dissolve shortly
25.2. Showfields DC 1 LLC 3077 M St. Washington, DC 20007	same nature of business as other entities	EIN: 88-2079334	From-To 5/2/2022. Active not expected to file for bankruptcy
25.3. Showfields NY 2 LLC 187 Kent Avenue Brooklyn, NY 11249	same as other businesses	EIN: 87-3521420	From-To 11/11/2021
25.4. Showfields Magic Box LLC 10250 Santa Monica Blvd Los Angeles, CA 90067	same as other entities	EIN: 86-2303613	From-To 3/3/2021. Company is expected to dissolve in 4 to 6 months

Debtor **Showfields Inc.**

Case number (if known) \_\_\_\_\_

**Business name address****Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

25.5. **Showfields NY 1 LLC**  
**11 Bond Street**  
**New York, NY 10012**

same as other entities

**Dates business existed**

EIN: **82-5300489**

From-To **4/24/2018**

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

**Name and address****Date of service****From-To**

26a.1. **Aminov Eshel and Partners LLP**  
**350 Motor Parkway**  
**Huappauge, NY 11788**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

**Name and address****Date of service****From-To**

26b.1. **Mazars USA LLP**  
**135 West 50th Street**  
**New York, NY 10020**

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

**Name and address**

**If any books of account and records are  
unavailable, explain why**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

**Name of the person who supervised the taking of the  
inventory**

**Date of inventory**

**The dollar amount and basis (cost, market,  
or other basis) of each inventory**

**28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.**

**Name****Address**

**Position and nature of any  
interest**

**% of interest, if  
any**

**EXHIBITS TO BE  
SUBMITTED**

**29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?**

Debtor **Showfields Inc.**

Case number (if known) \_\_\_\_\_

- ☐ No
- ☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Alex Brick	125 East 84th Street Apt. 8B New York, NY 10028		from inception until 3 months ago

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
- ☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Amir Zwickel 349 Metropolitan Avenue Apt. 6A Brooklyn, NY 11211	\$167,517.07	1 year pre-petition	payroll
	Relationship to debtor CRO			
30.2	Tal Zvi Nathanel 250 West 85th St Apt. 3B New York, NY 10024	\$167,517.07	1 year prepetition	payroll
	Relationship to debtor CEO			

31. **Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

- ☒ No
- ☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	----------------------------------------------------------

32. **Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

- ☒ No
- ☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
--------------------------	----------------------------------------------------

Debtor **Showfields Inc.**

Case number (if known) \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **October 6, 2023**

**/s/ Tal Zvi Nathanel**  
Signature of individual signing on behalf of the debtor

**Tal Zvi Nathanel**  
Printed name

Position or relationship to debtor **CEO**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court**  
**Eastern District of New York**

In re **Showfields Inc.**

Debtor(s)

Case No.

Chapter

**11**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<b>20,000.00</b>
Prior to the filing of this statement I have received .....	\$	<b>20,000.00</b>
Balance Due .....	\$	<b>0.00</b>

2. The source of the compensation paid to me was:

☒ Debtor      ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor      ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**October 6, 2023**

*Date*

**/s/ Rachel S. Blumenfeld**

**Rachel S. Blumenfeld**

*Signature of Attorney*

**Law Office of Rachel S. Blumenfeld PLLC**

**26 Court Street**

**Suite 2220**

**Brooklyn, NY 11242**

**718-858-9600**

**rachel@blumenfeldbankruptcy.com**

*Name of law firm*

**United States Bankruptcy Court  
Eastern District of New York**

In re **Showfields Inc.**

Debtor(s)

Case No.  
Chapter**11**

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
------------------------------------------------------------	----------------	----------------------	------------------

**-NONE-**

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **CEO** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **October 6, 2023**Signature **/s/ Tal Zvi Nathanel**  
**Tal Zvi Nathanel**

*Penalty for making a false statement of concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court  
Eastern District of New York**

In re	<b>Showfields Inc.</b>	Case No.	
	Debtor(s)	Chapter	<b>11</b>

**VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: <b>October 6, 2023</b>	<b>/s/ Tal Zvi Nathanel</b>
	<b>Tal Zvi Nathanel/CEO</b>
	Signer/Title
Date: <b>October 6, 2023</b>	<b>/s/ Rachel S. Blumenfeld</b>
	Signature of Attorney
	<b>Rachel S. Blumenfeld</b>
	<b>Law Office of Rachel S. Blumenfeld PLLC</b>
	<b>26 Court Street</b>
	<b>Suite 2220</b>
	<b>Brooklyn, NY 11242</b>
	<b>718-858-9600</b>

24 Seven LLC  
105 Maxess Road, Suite N201  
Melville, NY 11747

Agnia Ivanov  
1 Valley View Ct  
Huntington, NY 11743-5020

AJ Equity Group LLC  
1648 61st Street  
Brooklyn, NY 11204

Amazon Web Services Inc.  
2121 7th Avenue  
Seattle, WA 98121

American Express  
200 Vesey Street  
New York, NY 10285

Aminov Eshel and Partners LLP  
350 Motor Parkway  
Hauppauge, NY 11788

Amir Zwickel  
349 Metropolitan Avenue  
Apt. 6A  
Brooklyn, NY 11211

Avidxchange, Inc.  
P.O. Box 715376  
Cincinnati, OH 45271-5376

Avidxchnage  
PO Box 715376  
Cincinnati, OH 45271-5376

BDG-CPAs  
76 N. Walnut Street  
Ridgewood, NJ 07450

BeezB Ltd.  
Kefar Sava  
4465101 Israel



BFA NYC LLC  
20 W. 20th Street Suite 700  
New York, NY 10011

Broad Prince Realty Corp.  
580 Broadway, Suite 307  
New York, NY 10012

Calvin Jazz Walker  
4439 Crested Butte Ct.  
Jacksonville, FL 32210

CFG Merchant Solutions, LLC  
180 Maiden Lane, 15th Floor  
New York, NY 10038

Christine Bullock  
28 Burlington Path Rd  
Cream Ridge, NJ 08514-2003

Cision US Inc  
300 S Riverside Plz  
Chicago, IL 60606

Constance Blatt  
10 Downing St  
Apt. 5G  
New York, NY 10014-4792

Dan Klores Communication LLC  
261 Fifth Ave., 3rd Floor  
New York, NY 10016

DocuSign  
221 Main Street, Suite 1000  
San Francisco, CA 94105

Doreen Edri  
20355 NE 34 Ct.  
Aventura, FL 33180

Dynasty Capital 26, LLC  
700 Canal St. 1st Floor  
Stamford, CT 06902

Emily Goldberg  
1348 Beech Street  
Atlantic Beach, NY 11509

Frances Shellman  
137 W 82nd St, Apt. 1A  
New York, NY 10024-5545

Gabrielle Gangi  
23 Egret Way  
Center Moriches, NY 11934-3028

Gong.io Inc.  
265 Cambridge Ave. Suite 60717  
Palo Alto, CA 94306

Hanna Mitchell  
325 F St E  
Salt Lake City, UT 84103-3057

HubSpot Inc  
2 Canal Park  
Cambridge, MA 02141

Intercom.io  
55 2nd Street, 4th Floor  
San Francisco, CA 94105

Internal Revenue Service  
US Dept of Treasury  
Philadelphia, PA 19255-1498

Jacqueline McNamara  
741 6th Street  
Apt. 102  
Miami Beach, FL 33139

Jefferson G. Wenzel  
19 Dutch Street  
New York, NY 10038

Jenna Lichtman  
210 East 85th Street  
New York, NY 10028

Johanna Yannello  
200 W 70th St.  
Apt 7K  
New York, NY 10023-4327

Jonathan Schenirer - Dir PM  
167 Madison Avenue  
Ste 205 #107  
New York, NY 10016

Kalamata Capital Group, LLC  
80 State Street  
Albany, NY 12207

Kara Walsh  
310 1st Ave, Apt. 1E  
New York, NY 10009-1703

Laura Kluthe Executive Search  
20 Esmond Place  
Tenafly, NJ 07670

Manhattan Mini Storage  
220 South Street  
New York, NY 10002

Martina Asgari-Majd  
60 S 8th St.  
Apt 535  
Brooklyn, NY 11249-6154

McDermott Will & Emery  
P.O. Box 6043  
Chicago, IL 60680

Mesh Credit Card  
225 West 35th Street  
New York, NY 10001

Mor Edri  
32 Rutgers St.  
Closter, NJ 07624

New York State  
Queens Borough Hall  
120-55 Queens Boulevard  
Jamaica, NY 11424

Noho Bid  
636 Broadway, Suite 1208  
New York, NY 10012

Noho Bid  
636 Broadway Ste 1208  
New York, NY 10012

NYC Dept. of Finance  
66 John Street, Room 104  
New York, NY 10038

NYC Dept. of Finance  
59 Maiden Lane  
New York, NY 10038

OnDeck  
4700 W. Daybreak Pkwy  
Suite 200  
South Jordan, UT 84009

Ori Cohen  
Amos Oz 11  
Herzliya, Israel

Pipe Technologies Inc.  
360 NW 27th Street  
Miami, FL 33127

Profitian Finance NZ Ltd.  
3 Hamatechet  
Kadima Tzoran

Read Fresh by Nestle  
PO Box 856680  
Louisville, KY 40285

Riley Roche  
500 Brickell Ave  
Apt 2008  
Miami, FL 33131

Rocket Capital NY LLC  
1250 E. Hallandale Beach Blvd.  
Suite 505  
Hallandale, FL 33009

Romi Bachar  
301 E 79th St Apt 18C  
New York, NY 10075-0940

RTR Bag & Co.  
400 East 54th, Suite #10E  
New York, NY 10022

Samantha Benvegna  
401 2nd Ave, Apt 9C  
New York, NY 10010-3912

Saul Ewing Arnstein & Lehr LLP  
1500 Market Street, 38th Fl.  
Philadelphia, PA 19102-2186

Sendtowin LLC  
9639 Savona Winds Drive  
Delray Beach, FL 33446

Sharit Kassab  
9801 Collins Ave  
Miami Beach, FL 33154

Silicon Valley Bank  
c/o First Citizens Bank  
239 Fayetteville Street  
Raleigh, NC 27601

Small Business Administration  
409 3rd St, SW  
Washington, DC 20416

SoftwareHut LLC  
40 Exchange Place, Suite 1602  
New York, NY 10005

Sophy Bohbot  
1621 S Treasure Dr  
North Bay Village, FL 33141-4128

Spacio Terreno Inc.  
146 Pelton Avenue  
Staten Island, NY 10310

St. Moritz Security Services  
4600 Clairton Blvd.  
Pittsburgh, PA 15236

Studio 96 NYC Incorporated  
32 W. 39th Street, Fl. 4  
New York, NY 10018

Tal Zvi Nathanel  
250 West 85th St  
Apt. 3B  
New York, NY 10024

Tal Zvi Nathanel  
250 West 85th St  
Apt. 3B  
New York, NY 10024

Talentpop  
1954 Placentia Ave  
Costa Mesa, CA 92627

The Law Offices of Steven  
Zakharyayev, LLC  
10 W 37th St., 6th Floor  
New York, NY 10018

Ty'Arrah Walker  
770 Maine Ave SW  
Apt. 305  
Washington, DC 20024-2589

Valentina Diaz  
1865 Brickell Ave  
Apt 1608  
Miami, FL 33129-1621

Vane Libos  
2200 Sole Mia Square Ln  
Apt 615  
North Miami, FL 33181-1261

Warren Kalyan & Mattocks  
506 W 14th St A  
Austin, TX 78701

**United States Bankruptcy Court  
Eastern District of New York**

In re **Showfields Inc.**

Debtor(s)

Case No.

Chapter

**11**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Showfields Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

**October 6, 2023**

Date

**/s/ Rachel S. Blumenfeld**

**Rachel S. Blumenfeld**

Signature of Attorney or Litigant

Counsel for **Showfields Inc.**

**Law Office of Rachel S. Blumenfeld PLLC**

**26 Court Street**

**Suite 2220**

**Brooklyn, NY 11242**

**718-858-9600**

**rachel@blumenfeldbankruptcy.com**



**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK**

**STATEMENT PURSUANT TO LOCAL  
BANKRUPTCY RULE 1073-2(b)**

**DEBTOR(S):** Showfields Inc. **CASE NO.:** \_\_\_\_\_

Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (*or any other petitioner*) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:

[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]

☐ NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.

☒ THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:

1. CASE NO.: \_\_\_\_\_ JUDGE: \_\_\_\_\_ DISTRICT/DIVISION: **Eastern District of New York**

DEBTOR NAME: **Showfields NY2 LLC**

CASE STILL PENDING (Y/N): **Y** [If closed] Date of closing: \_\_\_\_\_

CURRENT STATUS OF RELATED CASE: \_\_\_\_\_  
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (*Refer to NOTE above*): **affiliate anticipated filing**

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:

2. CASE NO.: \_\_\_\_\_ JUDGE: \_\_\_\_\_ DISTRICT/DIVISION: \_\_\_\_\_

CASE STILL PENDING (Y/N): \_\_\_\_\_ [If closed] Date of closing: \_\_\_\_\_

CURRENT STATUS OF RELATED CASE: \_\_\_\_\_  
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (*Refer to NOTE above*): \_\_\_\_\_

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: \_\_\_\_\_

3. CASE NO.: \_\_\_\_\_ JUDGE: \_\_\_\_\_ DISTRICT/DIVISION: \_\_\_\_\_

CASE STILL PENDING (Y/N): \_\_\_\_\_ [If closed] Date of closing: \_\_\_\_\_

(OVER)

## DISCLOSURE OF RELATED CASES (cont'd)

CURRENT STATUS OF RELATED CASE: \_\_\_\_\_  
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (*Refer to NOTE above*): \_\_\_\_\_

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: \_\_\_\_\_

*NOTE:* Pursuant to 11 U.S.C. § 109(g), certain individuals who have had prior cases dismissed within the preceding 180 days may not be eligible to be debtors. Such an individual will be required to file a statement in support of his/her eligibility to file.

## TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, AS APPLICABLE:

I am admitted to practice in the Eastern District of New York (Y/N): Y

## CERTIFICATION (to be signed by pro se debtor/petitioner or debtor/petitioner's attorney, as applicable):

I certify under penalty of perjury that the within bankruptcy case is not related to any case now pending or pending at any time, except as indicated elsewhere on this form.

/s/ Rachel S. Blumenfeld

**Rachel S. Blumenfeld**

Signature of Debtor's Attorney

**Law Office of Rachel S. Blumenfeld PLLC**

**26 Court Street**

**Suite 2220**

**Brooklyn, NY 11242**

**718-858-9600**

\_\_\_\_\_  
Signature of Pro Se Debtor/Petitioner

\_\_\_\_\_  
Signature of Pro Se Joint Debtor/Petitioner

\_\_\_\_\_  
Mailing Address of Debtor/Petitioner

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

**NOTE:** Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.